

Please type a plus sign (+) inside this box → ]

526 Rec'd PCT/PTO 01 MAY 2000

Approved for [redacted] through 6/30/99. OMB 0651-0035  
Patent and Trademark Office DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>CHANGE OF CORRESPONDENCE ADDRESS</b> <i>Application</i>  Address to: Assistant Commissioner for Patents Washington, D.C. 20231	Application Number	09/530415
	Filing Date	May 1, 2000
	First Named Inventor	Karl HERMAN
	Group Art Unit	
	Examiner Name	
	Attorney Docket Number	306.38504X00

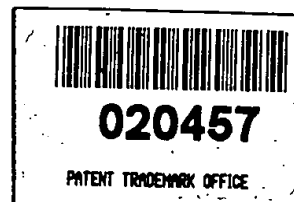
Please change the Correspondence Address for the above-identified application to:



Customer Number

020457

Type Customer Number here



OR

<input type="checkbox"/> Firm or Individual Name				
Address				
Address				
City		State		ZIP
Country				
Telephone		Fax		

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :

☐

Applicant.

☐

Assignee of record of the entire interest.  
Certificate under 37 CFR 3.73(b) is enclosed.

☒

Attorney or agent of record.

Typed or Printed Name	Alan E. Schiavelli	Registration NO.	32,087
Signature			
Date	May 1, 2000		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.